

# **THE PREVENTION MODEL – EXPANDING EFFORTS TO PROMOTE CHILD SAFETY**

PRESENTATION TO:  
LOS ANGELES COUNTY BLUE RIBBON COMMISSION

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# THE PUBLIC HEALTH/MEDICAL PREVENTION MODEL


Level	Definition	LAC System Examples
Primary prevention	Methods to avoid occurrence of disease. Most population-based health promotion efforts.	<b>ICAN:</b> public education <b>DPH:</b> public safety campaigns (back to sleep) <b>DCFS:</b> Parent support
Secondary prevention	Methods to diagnose and treat existent disease in early stages before it causes significant morbidity.	<b>DCFS:</b> Home assessments/visits <b>DHS/DCFS:</b> Hub Forensic & initial exams
Tertiary prevention	Methods to reduce negative impact of existent disease by restoring function and reducing disease complications.	<b>DCFS:</b> Placement in foster care; school support <b>DMH:</b> Ongoing mental health treatment/services <b>DHS/Medical:</b> Continuity medical care & care coordination

# PRIMARY PREVENTION

**Existing:** There are many experts in LAC

- DMH: adult mental health services
- Family planning services
- DPSS – rental and subsistence stipends (GR)

**Future opportunities:**

- Enhanced family support services – jobs, financial assistance
  - Accessible and affordable child care
  - Food and housing security
  - Understanding Adverse Childhood Events (ACES) studies
  - Enhanced adult medical, substance use and mental health services (Affordable Care Act opportunities)
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# SECONDARY PREVENTION

## Existing:

- DCFS: Hotline and Social Worker assessments
- Forensic examinations

## Future opportunities:

- Enhance initial social work assessments with developmental and social support assessments.
  - Risk stratification with appropriate interventions (school, parenting, respite care, food/clothes)
  - Orange, San Bernardino and Ventura have programs where PHNs accompany SWs on initial investigation home visit

# TERTIARY PREVENTION

## Existing:

- Placement – Kincare; foster homes; group homes; unfortunately, juvenile detention
- Hub services, mental health services

## Future opportunities:

- Screening exams at Hubs for all detained children
- *Patient Centered Medical Home* Model of care: continuity, team-based care coordination, comprehensive (mental, behavioral and physical health), population health, enabling services, social supports, school performance.



# NEXT STEPS FOR YOUR CONSIDERATION

- 1) PHNs accompanying CSWs to initial investigatory visits – pilot of 0-2 year olds in a single regional office using existing PHNs; planned evaluation
  - 2) Screening exams for all detained kids prior to placement – DCFS CSW workflow, consent issues, DHS capacity
  - 3) Hub PCMHs – Hub staffing augmented; integration of departmental staff (DHS, DCFS, DMH); DCFS/Courts to encourage patients to follow-up at Hubs for ongoing care
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